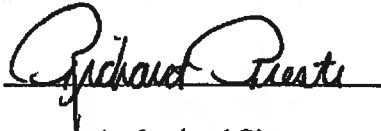


HAZARDOUS MATERIALS CONTROL PERMIT CERTIFICATION

I hereby certify on behalf of DOMUS LLC, the applicant for a permit or permit renewal from the Acton Board of Health pursuant to Chapter I of the Town of Acton General By-laws (the "Permit Application") that (a) the information contained in the Permit Application is true, accurate and complete, and (b) the facility located/operating at 54 KNOX TRAIL RD, Acton, MA and that is the subject of the Permit Application complies with the requirements for Approval of Hazardous Material Waste and Special Waste Permits as defined in section 3.5 of Chapter I of the Town of Acton General By-laws, Hazardous Materials Control, as amended.*



Authorized Signatory

5/5/11

Date

* TO THE BEST OF
MY KNOWLEDGE

(A0128679 2)

978-264-9630 FAX



ACTON BOARD OF HEALTH
APPLICATION for INITIAL HAZARDOUS MATERIALS PERMIT

Legal Name of Facility or Establishment: DOMUS LLC.
Site Address: 54 KNOX TRAIL ACTON, MA.
Mailing Address: 2352 MAIN ST, CONCORD, MA. 01742
Business Telephone: 978-897-5555
Corporate Officers: RICHARD PRESTI.
Emergency Contact Person: RICHARD PRESTI
Emergency Telephone (Day): 978-505-5050 Emergency Telephone (Night): 978-505-5050
Type of Business:

*Aquifer Location:

- ☐ Well protection [1]
☒ Recharge protection [2]
☒ Aquifer protection [3]
☐ Watershed protection [4]

*Watershed District: 4-8

- ☐ Fort Pond
☐ Nashoba Brook

*Maps available at Acton Health Department.

Type(s) of Permits Needed:

- ___ Remedial action following a discharge: [# 5 (discharge), # 6 (remediation)]
___ Small or large scale generator (or > 100 kg/220 lbs/25 gal/mo: material or waste):
 [generator: # 3 (mat.), # 1 (waste) (lrg.), # 2 (waste) (sm.)] [user: # 4 (mat.), # 7 (waste)]
☒ Storage (> 25 gal or lb) > 24 hrs: [# 8, # 9 (mat.), # 12, # 13 (waste)] #8 #9
___ Storage, use, generation of extremely hazardous material
___ Storage of hazardous material or waste overnight in trucks
___ Storage of prepackaged hazardous material (> 50 gal or lb): [# 10 (lrg.), # 11 (sm.)]
☒ ~~Storage~~ storage of flammable or combustible materials
___ Change in material stored
___ Removal of underground tank

Requirements: (Please ensure to include all required material before submission to Acton B.O.H)

- ___ Complete Non-Waste and Waste Information (sections A and B)
☒ M.S.D.S. for all chemicals listed on application
☒ Emergency or contingency plan for an accidental spill
☒ Site plan of premises showing areas where chemicals are stored (including tanks and piping), distance to roads or other buildings, unique slopes, arrow indicating north, and location of safety equipment. (see section C)
☒ Copies of disposal manifests (or other documents) showing proper disposal measures of all chemicals listed.
___ Evidence of date(s) of purchase for all storage systems spreadsheet kept on site
___ Copies of all relevant documentation (permits and citations)
___ Certifying Endorsement

-----For Internal Use Only-----

INFORMATION TO BE INCLUDED

WITH THE HAZARDOUS MATERIALS PERMIT APPLICATION:

☒ Copies of the Material Safety Data Sheets (MSDSs) for all chemicals listed on the Annual Throughput Sheet

☒ An Emergency or Contingency Plan in case of any accidental spill

☒ A site plan of the premises, including the area where all chemicals are stored (*use enclosed sheet*)

☒ The presence of a representative from your company at the Board of Health meeting during the application review is required

☒ Copies of all hazardous waste transport manifests to demonstrate that proper disposal measures are being taken. If manifests are not required by state or federal law, some other proof of proper disposal shall be submitted.

- ☐ MA Haz. Waste Mgt. Act (MGL ch 21 C)
- ☐ MA Clean Water Act (MGL ch 21 S. 26)
- ☐ RCRA (42 USCS 6901)
- ☐ Clean Air Act (42 USCS 1857)
- ☐ Clean Water Act (33 USCS 1251)

- ☐ SPCC (Title 40 CFR 109, 110, 112)
- ☐ FIFRA (7 USCI 36)
- ☐ FIFRA (7 USCI 36)
- ☐ Safe Drinking Water Act (42 USCS 300f)
- ☐ TSCA (15 USCS 2601)

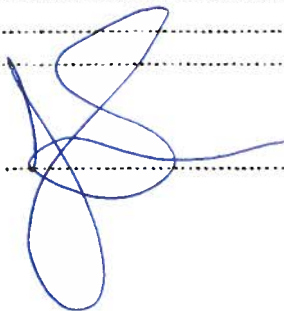
____ Representatives at Board of Health application review hearing (date:)

Recommended Conditions:

4/25

Notes:

Agent Signature/Date:



A. Hazardous Material (Non-Waste) Inventory Information

Complete the table below for all non-waste inventory. Use additional pages if necessary.

Chemical/Common Name	Max. Qty (at any one time)	Container Size (single largest container)	Location(s) (see section C)
P800	✓ gal. lbs. cu. ft.	275-500 gal. 32275 lbs. 2-500 gals ft.	See attached
	gal. lbs. cu. ft.	gal. lbs. cu. ft.	
	gal. lbs. cu. ft.	gal. lbs. cu. ft.	
	gal. lbs. cu. ft.	gal. lbs. cu. ft.	
	gal. lbs. cu. ft.	gal. lbs. cu. ft.	
	gal. lbs. cu. ft.	gal. lbs. cu. ft.	

B. Hazardous Waste Inventory Information

(Hazardous Waste Generator Permit Application/Amendment)

Complete the table below for all waste inventory. Use additional pages if needed.

Name of Hazardous Waste	Treatment/Disposal Method(s) (Definitions provided on bottom of page)	Max. Qty (at any one time)	Annual Qty. Generated	Location(s) (see Section C)
	Recycled on-site. Treated on-site. Shipped off-site for recycling/treatment/disposal	gal. lbs. cu. ft.	gal. lbs. cu. ft.	
	Recycled on-site. Treated on-site. Shipped off-site for recycling/treatment/disposal	gal. lbs. cu. ft.	gal. lbs. cu. ft.	
	Recycled on-site. Treated on-site. Shipped off-site for recycling/treatment/disposal	gal. lbs. cu. ft.	gal. lbs. cu. ft.	
	Recycled on-site. Treated on-site. Shipped off-site for recycling/treatment/disposal	gal. lbs. cu. ft.	gal. lbs. cu. ft.	
	Recycled on-site. Treated on-site. Shipped off-site for recycling/treatment/disposal	gal. lbs. cu. ft.	gal. lbs. cu. ft.	

C. Facility Site Plan/Storage Map

Prepare and submit with this Registration Form a simple site map which shows the following information:

- North direction • Street(s) adjacent to facility • Electrical, water, and gas shutoff valves
- Basic floor plan for each building containing hazardous materials/wastes which indicates building entrance(s) and hazardous material/waste storage locations (use grid locations or assign a code - A, B, C, etc. - to clearly identify each storage location for use in the above inventories).

Site Address: 54 KNOX TRAIL RD

City: ACTON

Date Map Drawn: ATTACHED -

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z
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D. Endorsement

I declare that the above information is true and correct to the best of my knowledge. I agree to comply with all applicable regulations regarding storage, handling, and disposal of hazardous materials and hazardous wastes.

RICHARD PRESTI
Owner/Operator's Name (Print)

Richard Presti
Owner/Operator's Signature

3/25/11
Date

----- Do Not Complete below This Line -----

TOWN OF ACTON
HAZARDOUS MATERIALS CONTROL BYLAW

April 1, 2011

Due: \$280

Domus LLC

Category: 4, 8, ,

2352 Main Street

Concord, MA 01742

Site Address

54 Knox Trail Acton, MA 01720

HAZARDOUS MATERIALS CONTROL PERMIT RENEWAL APPLICATION

Categories

- | | |
|--|--|
| 1. Hazardous Waste Generator (\$65) | 2. Sm. Hazardous Waste Generator (\$45) |
| 3. Hazardous Materials Generator (\$65) | 4. Hazardous Materials User (\$45) |
| 5. Discharge Permit (\$140) | 6. Remediation Permit (\$140) |
| 7. Hazardous Waste User (\$65) | 8. Haz. Mat. Storer Large Industry (\$235) |
| 9. Haz. Mat. Storer Small Industry (\$160) | 10. Haz. Mat. Storer Large Retail (\$170) |
| 11. Haz. Mat. Storer Small Retail (\$140) | 12. Haz. Waste Storer Sm. Industry (\$45) |
| 13. Haz. Waste Storer Retail (\$45) | 14. Haz. Waste Storer Lge. Industry (\$65) |

Provide the following information under the authority of the General Laws of the Commonwealth of Massachusetts, Chapter 94, Section 305A, and Chapter 3, Section 5.

ESTABLISHMENT NAME:

DOMUS, LLC

ESTABLISHMENT ADDRESS:

BLDG 3, UNIT 3-B, C-A PARK, 2352 H. ST. CONCORD 01742

E-MAIL ADDRESS:

WALAWUNGUZ@GMAIL.COM, RICH. PRESTI@GMAIL.COM

ESTABLISHMENT TELEPHONE:

978-897-5555

OWNERS/CORPORATE OFFICERS:

OWNER: RICHARD PRESTI

ADDRESS:

485 MASS. AVE. ACTON

TELEPHONE:

978-264-9981

ON-SITE MANAGER:

BILL LAWRENCE

Maximum Potential Quantity of Materials: Gals/Lbs Stored _____ Used _____

Maximum Potential Quantity of Wastes: Gals/Lbs Stored _____ Used _____

Pursuant to the General Laws of Massachusetts, Chapter 62C, Section 49A, I certify under the pains and penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes required under law.

Richard Presti
Signature of Owner/Applicant

20-2110023

F.I.N. Number

Date

4/14/11

RECEIVED

APR 15 2011

ACTON BOARD OF HEALTH

5/1/2011

Expires 5/1/12

Paid: **\$280**

**TOWN OF ACTON
PERMIT
HAZARDOUS MATERIALS CONTROL BYLAW
Domus LLC,
2352 Main Street Concord, MA 01742**

Is hereby granted a permit to store and use Hazardous Materials at **54 Knox Trail** Acton, MA 01720. This permit is granted with the conditions as noted on the attached list of conditions assigned to your facility.

Permit Categories: **4,8,,**

*See below explanation of permit categories

HAZARDOUS MATERIALS CONTROL PERMIT CATEGORIES AND FEES

<u>Category</u>	<u>Initial</u>	<u>Renewal</u>
1. Large Hazardous Waste Generator	\$160	\$65
2. Small Hazardous Waste Generator	\$60	\$45
3. Hazardous Materials Generator	\$160	\$65
4. Hazardous Materials User	\$50	\$45
5. Remediation Discharge Permit	\$575	\$140
6. Remediation Permit	\$595	\$140
7. Hazardous Waste User	\$160	\$65
8. Hazardous Materials Storer Large Industry	\$510	\$235
9. Hazardous Materials Storer Small Industry	\$360	\$160
10. Hazardous Materials Storer Large Retail	\$430	\$140
11. Hazardous Materials Storer Small Retail	\$305	\$160
12. Hazardous Waste Storer Small Industry	\$160	\$65
13. Hazardous Waste Storer Retail	\$60	\$45
14. Hazardous Waste Storer Large Industry	\$160	\$65